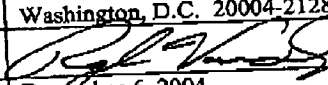
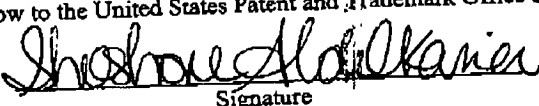


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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	10/719,385	
		Filing Date	December 6, 2004	
		First Named Inventor	Margot O'Toole et al.	
		Group Art Unit	1644	
		Examiner Name	Aniruddho R. Chaudhuri	
Total Number of Pages in This Submission		11	Attorney Docket Number	031896-090001 (AM100863)

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Declaration and Power of Attorney <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interventions <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Request for Corrected Filing Receipt with Enclosures <input type="checkbox"/> A self-addressed prepaid postcard for acknowledging receipt <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1. Response to Restriction Requirement
Remarks <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 19-2380 for the above identified docket number.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Raymond Van Dyke (Reg. No. 34,746) Nixon Peabody LLP 401 9th Street, N.W. Suite 900 Washington, D.C. 20004-2128
Signature	
Date	December 6, 2004

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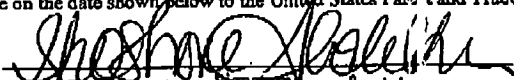
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:)
Margot O'Toole *et al.*) Group Art Unit: 1644
Serial No.: 10/719,385) Examiner: Aniruddho R. Claudhuri
Filed: November 21, 2003) Confirmation No: 2575
For: Composition and Method for Treating)
Lupus Nephritis)

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Mail Stop **AMENDMENT**
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P.O. Box 1450
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RESPONSE TO RESTRICTION REQUIREMENT

Sir:

In response to the Office Action mailed November 4, 2004, Applicants respectfully request reconsideration of the application in view of the following amendments and remarks.

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks begin on page 9 of this paper.

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